## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

optication or Docket Number 20093000 810

in the state of

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			35					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			3/5 minus 20=		• 15			X\$ 9=	135	OR	X\$18=	Λ.	
INDEPENDENT CLAIMS			3 minus 3 =		В			X40=	<i>,</i>	OR	X80=	•	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						•	TOTAL	490	OR				
3 29 O (Column 1) (Column 2) (Column 3)								SMALL E		OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 11	Minus .		<b>3</b> 5	<b>=</b> 2		X\$ 9=		OR	X\$18=		
AME	Independent	- /	Minus	FAIDEAL	<u>3</u>	-		X40=	•	OR	X80=		
5 5	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
	,					•	. 1	TOTAL ADDIT. FEE	0	OR	TOTAL ADDIT. FEE		
•	(Column 1) (Column 2) (Column 3)										•	,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREV	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	;Total	• 19	Minus	•• 6	20	= 0		X\$ 9=		OR	X\$18=		
	Independent • / Minus ••• 3 FIRST PRESENTATION OF MULTIPLE DEPENDENT C					- 6		X40=		OR.	X80=		
<u>.</u>	rina i Friese	MINION OF MC	CHPLE DEF	CADEN				+135=	- ;	OR	+270=		
								TOTAL ADDIT, FEE	10	OR	TOTAL ADDIT. FEE		
	٠. بـر	(Column 1)			mn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
	Total	• .	Minus .	**		=		X\$ 9=		OR	X\$18=	ï	
	Independent	•	Minus	CAIDEN	T CLAIL	=	┨	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	·	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
-	'If the "Highest Nu The "Highest Nun	mber Previously Pa nber Previously Pa	ald For IN THI id For (Total o	S SPACE Independ	is less that dent) is th	an 3, enter "3." e highest numb	er fo	-	propriate bo	- x in co			